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CONFIRMATION NO. 6243

| SERIAL NUMBER<br>10/613,996  | FILING OR 371(c)<br>DATE<br>07/08/2003<br>RULE  | CLASS<br>709              | GROUP ART UNIT<br>2157  | ATTORNEY<br>DOCKET NO.<br>33081/US/2 |                            |
|--|---|---------------------------|---|--------------------------------------|----------------------------|
| <b>APPLICANTS</b><br>Yennun Huang, Bridgewater, NJ;<br>Ping-Fai Yang, Berkeley Heights, NJ;<br>Tsu-Wei Chen, Berkeley Heights, NJ;<br>Shalini Yajnik, Berkeley Heights, NJ;<br>Chih-Mei Lin, Parsippany, NJ;<br>Alex W.P. Fung, South Plainfield, NJ;  |   |                           |   |                                      |                            |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/394,631 07/08/2002 and is a CIP of 10/199,356 07/19/2002<br>and is a CIP of 10/199,368 07/19/2002<br>and is a CIP of 10/199,439 07/19/2002 PAT 7,117,270<br>and is a CIP of 10/199,369 07/19/2002 PAT 6,910,033<br>and is a CIP of 10/199,388 07/19/2002                            |   |                           |   |                                      |                            |
| <b>** FOREIGN APPLICATIONS *****</b><br>NONE   |   |                           |   |                                      |                            |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 10/02/2003  |   |                           |   |                                      |                            |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <i>[Signature]</i> <i>[Initials]</i><br>Examiner's Signature Initials |   | STATE OR<br>COUNTRY<br>NJ | SHEETS<br>DRAWING<br>23   | TOTAL<br>CLAIMS<br>27                | INDEPENDENT<br>CLAIMS<br>4 |
| <b>ADDRESS</b><br>38598  |   |                           |   |                                      |                            |
| <b>TITLE</b><br>Packet routing via payload inspection for quality of service management  |   |                           |   |                                      |                            |
| <b>FILING FEE<br/>RECEIVED</b><br>545  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                           | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |                            |